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Encouraging communication with deaf children through visual art activities

Kamila Riscili

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Masters Project: Encouraging Communication
with Deaf Children Through Visual Art Activities

Submitted to the Faculty of the
Master of Science Program in Secondary Education of
Students who are Deaf or Hard of Hearing

National Technical Institute for the Deaf
ROCHESTER INSTITUTE OF TECHNOLOGY

By

Kamila L. Riscili

In Fulfillment of the Requirements for the Degree of
Master of Science

Rochester, New York

September 12, 2002

Kamila L. Riscili

Approved: _____
(Project Advisor, Pat DeCaro)

Approved: _____
(Program Director, Gerry Bateman)

Running head: ENCOURAGING COMMUNICATION WITH DEAF CHILDREN

Encouraging Communication with Deaf Children

Through Visual Art Activities

Kamila L. Riscili

National Technical Institute for the Deaf

MSSE Master's Project

Project Advisor: Pat DeCaro

Program Director: Gerry Bateman

September 12, 2002

Abstract

An educational product has been developed based on a review of the literature in the field of art therapy with a focus on how art therapy may affect the communication of deaf children. A literature review has indicated that art therapy, when conducted with hearing and deaf children, has facilitated expression and communication. This has occurred through transference of feelings from the right, visual-spatial and creative hemisphere of the brain to the left hemisphere, which includes conceptual and intellectual thinking as well as the 'language function.' Based on these findings, it is projected that art therapy may alleviate some of the common communication problems that exist among deaf children, especially those who have not acquired a full language. It is also projected that it may have expressive benefits when used outside of formal therapy situations such as in an art classroom. This product discusses previous case studies and the outcome of art therapy primarily with hearing children. It then suggests adaptations that may be made for using these different therapies with deaf children. It also makes recommendations on how individuals who are not art therapists may begin using art therapy exercises.

Introduction

Project Overview

This project is intended to be a resource that educators or other professionals working with deaf students may refer to if they are considering using art therapy with deaf children. The guide defines art therapy and includes a brief, general review of the literature on the topic of art therapy, as well as actual therapeutic procedures that have been used previously.

Procedures for collection of data for this product included an initial literature review and addition of material over time, and collection of art therapy exercises and their results. Each of these exercises is fully referenced so users of this resource can find the articles they originated from. A professional who is knowledgeable and experienced in using art therapy with deaf children has also been interviewed. An interview protocol (Appendix A) was developed and the interview, of about two hours in length, included discussion of the relevance of art therapy and modifications needed for application with deaf students. These suggested modifications were used to create an art therapy guide.

Importance of Problem

The literature suggests that art therapy may facilitate communication in patients who are unable to communicate as a result of an emotional or psychological "block" or it may serve simply as communication channel for patients who cannot physically communicate in other ways (Prager, 1993). As a result of this, some art therapists have found that art therapy expedites the process of psychological or emotional healing (Black & Kazmarek, 1992). It has also been found that through expression, art therapy promotes positive emotions (Lynch & Chosa, 1996).

Due to the range of emotional, social, and psychological issues that deaf children may have, it seems that they could benefit from art therapy (Silver, 1999; Vaughn, Bos & Schumm, 2000). There are many different communication issues that follow deafness, such as the varying ages of acquisition of language and its affect on how well deaf children learn language (Bornstein, 1990; Silver). Expression through art therapy may be a positive method of communication.

Current information on art therapy as it is used with deaf children is limited and difficult to find. The creation of an informative guide on art therapy in relation to deaf children provides an easily accessible resource that also lists other available art therapy resources.

Project Objectives

The project objectives include the following: (a) Creating a well-organized, informative guide that is easy to navigate and understand, (b) including an overview of different kinds of art therapy that are currently used (c) making modifications to these therapeutic exercises based on knowledge of deaf learner characteristics in order to facilitate communication, and (d) listing art therapy and deafness resources for more in depth research.

Order of Presentation

The remainder of the paper is comprised of the following:

1. The literature review includes a variety of case studies involving art as therapy with hearing and deaf children. Generalizations and conclusions pertinent to the field of art therapy and how it may be used with deaf children are included.
2. The activities describe the process to be taken in order to achieve the aforementioned objectives. They give a detailed explanation of procedures used in reaching these objectives.

3. The general project product is an informative guide discussing different types of art therapy as they are currently used and also includes suggestions and considerations to be taken for using these with deaf children.

4. Discussion of the product occurs in regard to whether or not the project objectives are met. Limitations to the product as well as possible benefits are also included.

5. References of information cited in the text are listed.

6. Appendices of additional materials including interview protocol and consent form (Appendix A), interview (Appendix B), and brochure (Appendix C) are attached.

Introduction to Art Therapy

Art therapy is a form of expressive therapy that engages participants in producing different kinds of artwork where the client(s) use their creative abilities in some way (Herd, 1999). It may be actualized through music arts or play therapy, however, this research focuses exclusively on the visual forms of art therapy (Herd). This includes, but is not limited to painting, drawing and working with clay. Though traditional art media may be used to create the art, the emphasis is not on the conventional, aesthetic function of art in our society, but rather on the expression that occurs as a result of the therapy. This created artwork may be analyzed by an art therapist conducting the art therapy in order for him or her to better understand the participant's plight. It could also simply serve as a means for expression when used by persons other than a licensed therapist. Due to the fact that there is very little information available on art therapy as it is used with deaf children, the focus here is on both hearing and deaf children.

History

Art therapy as it is used today began in the 1960s with Margaret Naumberg "who believed that people can present their unconscious anxieties and desires through art" (Herd, 1999, p. 1). Her philosophy is rooted in both Jungian and Freudian ways of thinking (Herd).

Jung's philosophy is closely related to the field of Psychotherapy because of the emphasis that is placed on the "images of memories and dreams and their connection to feelings in helping people work through emotional conflicts and problems" (Malichiodi, 1998, p.10). Here, it is believed that through the interpretation of images an art therapist may serve his patients.

Freud gives merit to our subconscious dreams, feelings, and thoughts being experienced through visual imagery (Malichiodi, 1998). Though Psychotherapy and interpretation of images are a part of Freud's philosophy, he believes that a major strength of art therapy lies in the actual act of creating artwork. This is because it serves as an expressive channel. This process of experiencing subconscious "unacceptable desires and drives...through the...socially acceptable art medium," is known as "sublimation" (Landgarten, 1998, p. 240). Henley (1992) describes this as "the integration and release of internal or psychic tensions through normal activities" (p. 15). He goes on to say "artistic activity can be a vital vehicle for both the discharge and, ideally, the transformation of primitive instincts into images or objects of aesthetic strength and beauty" (p. 15).

Malchiodi (1998) notes the difference between the Jungian and Freudian understandings of art therapy. She describes the first as "art psychotherapy" in which the issues, emotions and conflicts are communicated through reading into the symbols found in art (p. 6). She maintains that the second, i.e., "Freudian approach" known as "art as

therapy," assumes that there is a "healing power in the creative process" (p. 5). Here, through self-expression a person may attain "personal fulfillment, emotional reparation, and transformation" (p. 5). Malchiodi believes that therapists today use a combination of both philosophies of art therapy. Horovitz (1991) agrees that "both the art process and product have meaning and form which take on the structure of conceptual, visual language" (p. 110).

Despite varying views on what therapists' feel their role should be, Herd (1999) emphasizes the importance of being encouraging to the client and creating an environment in which the client may comfortably create. The client may then talk about his or her artwork and "subsequent emotional responses to the formation, process, and outcome of that art," and, upon doing this, try to find common themes or symbols in the artwork (p. 4).

Literature Review

The articles included in this review are primarily case studies of a variety of children who underwent some form of art therapy. The case studies contain information on children and adolescents who experience sexual abuse, loneliness, behavioral problems, serious illness, Attention Deficit Disorder (ADD), deafness, or who are immigrants. Though the information gathered covers a broad area and results are not uniform enough for specific analysis, commonalties were found between the articles.

The literature reviewed demonstrates that the art created in therapy serves as a channel for expressing the participant's thoughts, ideas and feelings. There seem to be two main characteristics that contribute to the individuals' need for expressive therapy. Either the individual is physically unable to communicate, or the individual is unaware of his or her feelings and, therefore, cannot communicate them.

Physical Inability to Communicate

The physical inability to communicate is demonstrated in Prager (1993). He describes a young boy who is physically unable to speak because his medical condition requires him to have a tube down his throat. As might be expected, this young boy, Arthur, draws a picture of a house with a drainpipe that the therapist suggests might be an expression of concern about his tube (Prager). He then draws an image of his trip to the hospital and the "thing down his throat" in the intense colors of red and orange. Here, Arthur is able to creatively express himself because the colors probably represent his feelings. Though the therapist does not provide details about her interpretation of this use of color, this author might suggest the possible conclusion that the warm colors represent a burning sensation or pain as opposed to cooler, more soothing colors.

Another example of a physical inability to communicate occurs between a deaf boy and his hearing family (Horovitz-Darby, 1991). Though both the boy and his family are capable of communicating in their own languages, there is a gap between the boy's use of American Sign Language and his family's use of spoken English where communication does not occur. The boy actualizes his feelings of not belonging to the family through several drawings that carry a theme of isolation and separation (Horovitz-Darby). This author states that her purpose is recognizing these feelings and helping to "mediate appropriate family interaction" (p. 111).

Lack of Awareness of Feelings

Often, when the participants are unaware of their own feelings, expressive therapy serves as a means of bringing those feelings to the forefront. This obliviousness is usually a result of a subconscious block due to an overwhelming emotional quandary.

Prager (1993) describes such a case involving Sara, a fifteen-year-old girl who has recently become paralyzed. Though she has already reached a maturity that enables her to understand her illness, the severity of her emotions keeps her from expressing them. They require further prompting to bring them out. Sara is more than willing to create artwork but has an "adult sense of control" and attempts to suppress unpleasant images (Prager). For example, on one occasion, she draws a man's head that resembles 'death.' When she realizes what she has drawn, she throws it away and begins a new drawing. Sara's counselor establishes that Sara's "left brain apparently attempted to censor, resist, and block: however, the negative emotions of her right brain broke through in her drawing of a death mask, which caused intense, perhaps unrecognized fear" (p. 6).

Makes Participants Aware of Their Feelings

Art is used to transfer feelings from right brain to left brain, bringing them to the forefront. Though the articles do not provide an explanation as to exactly how this occurs, it is evident that the creative function resides in the right side of the brain while the language function may be found in the left. The art itself is often an unconscious representation of the participant's feelings that are initialized in the right brain. Upon seeing the art, a participant may realize his or her feelings in a more conscious manner, allowing him or her to verbalize about them (Silver, 1978). In this way, there is a shift from the right brain to the left. Through this shift and verbalization, participants become conscious of their feelings and may begin to deal with them, bringing them through the healing process.

The right to left brain shift may be seen in a study (Black & Kazmarek, 1992) of a late-adopted child. In this study, Black and Kazmarek attempt to encourage verbalization through art therapy.

Verbalization would, in fact, indicate the participant's awareness of his feelings in a conscious manner. As the therapy commences, the participant, Tom's, drawings are at an elementary level (below his age level) in which his figure drawings lack facial features. The authors note that as the therapy continues, Tom's drawings mature along with his ability to express himself verbally (Black & Kazmarek).

Alleviates Negative and Promotes Positive Emotions

The expression of feelings through art therapy seems to alleviate the negative emotions that put strain on the individuals undergoing therapy. In Lynch and Chosa's study (1996), individuals with disabilities are interviewed and asked if and how art therapy programming has helped them. Eighty percent of these individuals report that art therapy has given them more positive self-esteem which has also contributed to meeting new people, developing new friendships, and enhancing social skills (Lynch & Chosa).

Researchers Find Similarities between groups

Researchers or therapists may utilize the information obtained from the expressed emotions to find similarities between certain "troubled" groups (i.e. ADHD children, immigrants, and sexually abused children). In a study of a child who is sexually abused, the therapist finds that the child's behaviors parallel research findings by Sagar (1990). For example, the child undergoes a bathing ritual and packaging up of her artwork at the end of each session (Hanes, 1997). Hanes notes that Sagar had also observed this package-making ritual by other sexually abused children. Likewise, research done on immigrant adolescents highlights the similarities within the group itself (Maat, 1997). At the onset of the therapy sessions, most of the children draw in black and white, which the author assumes suggests sadness and deprivation (Maat). Another common theme arises when the children are

asked to draw an image of how they felt when they first moved to the United States. Almost all of the children separate their paper with a line down the center and draw "sad" departures from their homelands and "happy" arrivals to the U.S. In addition, the therapist notes that as the children realize their similarities to each other, they become more self-aware and seem better able to accept their new environment (Maat).

Significance to Deaf Children

Due to the universal nature of art, it is viewed as a non-discriminatory visual language to which both deaf and hearing children have access. Henley (1992) states that "Given sufficient support and some compensatory modifications in the teaching strategies, deaf children can progress on an even par with the intact hearing child" in art activities (p. 44). Additionally, "With the unfortunate rise in secondary handicaps (including deaf children who are socially and economically disadvantaged, minorities, emotionally handicapped, and multiply physically handicapped children) comes the need to develop programs which can address the total emotional and cognitive needs of the contemporary deaf child. It will be recognized that art programs have that capacity to engage the deaf child on all these fronts" (p. 45).

Art therapy works well with children because the materials themselves are intriguing and children want to use them (Herd, 1999). If a certain activity is resisted, the therapist may resort to other kinds of therapy. Lenore Steinhardt describes this as a "'creative arts approach'" (p. 3). Horovitz (1991) states that the "art materials can help foster change both in communication and family system's functioning" (p. 111).

Additional Benefits

Aside from the expressive benefits already discussed in this

document, therapists find that art contributes to socialization, cognition, and coping, as well as providing a way to assess children's gains in these areas.

Art can provide a child with the "opportunity to exercise his capacities for abstraction" in thought (Silver, 1963, p. 409). It can stimulate and allow imagination, association, memory, perception, organization, emotion, and motivation (Silver).

Silver and Harrington (1968) conducted a study that entailed using paintings she had gathered from an experimental art class she taught at three schools for the deaf. She had 20 specialists who included psychiatrists, psychologists, professors of special education, and educators of the deaf, aphasic and normally hearing children. These "judges were asked if they found evidence in the pictures that art afforded opportunities to generalize, imagine, remember, associate, evaluate, and express ideas and emotions. They were also asked whether they found evidence that would be useful in assessing various abilities, interests, knowledge, attitudes, and needs" (p. 478). Of the 337 answers given to these questions, 93% supported the belief that the pictures did in fact provide this evidence (Silver & Harrington).

Silver and Harrington (1968) also suggest that the "control" children have over their art materials allows them to make a statement about the events, or the people in their lives. Through expressing these feelings, children may, "obtain relief from tensions, confusions, loneliness, and fear" (p. 21). In effect, through art, children are able to cope with these everyday issues.

In terms of assessment of the child, Silver (1968) feels that "Much is also to be gained from an evaluation of the level of creativity expressed in art work; in the organization of the product; in the appreciation of the use of colors; in the association of related

and apparently unrelated events, objects and persons; and in the ability to initiate, carry through, and complete a nonverbal activity" (p.21).

Possible Limitations of Art Therapy

Though there have been some positive results of using art therapy, issues arise that may compromise results. Literature on art therapy seems to be comprised mostly of case studies in which analysis may be subjective. Many of the articles do not include all of the data so that those attempting to do a literature review may analyze the information for themselves. It seems that the authors (possibly without knowing it) may be highlighting only those details that support their research hypotheses or goals.

In a similar light, the researchers' interpretation of the details they choose to analyze may also fall victim to personal bias. Though the researchers are careful to include the factual evidence (i.e. description of the particular artwork being analyzed), and their reasoning for making a claim about it, other explanations for the work produced may still be possible. For example, one boy drew a picture of his new house in a transparent yellow color. His therapist took that to mean that he had not accepted the new house as a real place because the color was not strong enough (Henley, 1999). An alternate understanding of this that contradicts the author might be that the house was actually pale yellow or that yellow crayons tend to be translucent.

Due to the personal interaction between the researchers and the participants, we must also question how genuine the participants' reactions are and if and to what degree the researchers are 'suggestive' in their methods. In the case study about a deaf boy, John, for example, his therapist notes the use of locks on his clay forms (Horovitz-Darby, 1991). It would be important to know how the

locks are made available to the boy. For instance, their presence among traditional art materials may have been intriguing to the boy and encouraged his using them in his artwork. Horovitz discussed another issue related to art therapy where the therapist's neutral role may be jeopardized because the therapist's "expectations and attitudes from the past may greatly influence the thoughts and actions of their patients" (p. 111). This phenomenon is known as "countertransference" (p. 111). Therapists should instead "'draw out our patient's imagery, not our own; and if we speak about our patient's work, we should describe what we see and not our associations to it'" (p. 112).

An example of countertransference may be seen in Horovitz's work while conducting art therapy with a lesbian couple in which one partner was deaf (1991). At the end of the sessions, the therapist continued communication with the couple because she cared about them personally. The therapist's artwork with the couple during the final session was a superwoman plaque which was triangular in shape. The therapist took this to symbolize her "buying into the family system and conflicting dynamic of triangular relationships" because she had not maintained a purely professional relationship with them (p. 123).

Though questions are raised about the subjectivity of therapists and the literature itself, the review findings highlight important issues. It seems that art therapy has had an overall positive effect on the people receiving treatment, especially through encouraging communication and promoting positive feelings.

Interview

A semi-structured interview was conducted with a professional working in the field of art with deaf children (Appendix B). The interview questions were designed to focus on the relationship between art as it is used by an art educator and its affect on deaf children's

communication (Appendix A). The interviewee, Adrianna ippeL Slutzky, was a former art teacher who worked at the Rochester School for the Deaf for seventeen years as an Art Teacher. She holds a Master of Science of Teaching Art degree from the Rochester Institute of Technology and is currently a sculptor and retired teacher. It is important to note that the interviewee is not a trained therapist.

Relationship to literature review findings.

Slutzky is a strong believer in using art therapy and claims she used it in her art room frequently. She feels it is especially important to use with children who have social problems, low self-esteem, or who are severely mentally troubled in some way. She maintains, "I think art therapy is a wonderful way to facilitate communication because it can be done in such a way that the child doesn't know that he's actually communicating at the depth that he or she is". She feels that along with communication, additional benefits of art therapy are increased self-esteem, uniqueness, self-governance, and emotional benefits, as well as giving children an appreciation for art. This goes hand-in-hand with findings from the literature review in that children who were experiencing art therapy had emotional, behavioral, and communication problems (Horovitz-Darby, 1991; Prager, 1993). The literature review also indicated increased expression and communication, becoming aware of feelings, and alleviation of negative emotions (Black & Kazmarek, 1992; Lynch & Chosa, 1996).

Like the therapists in the literature review (Henley, 1992; Herd, 1999; Horovitz-Darby, 1991; Landgarten, 1981; Malchiodi, 1998), Slutzky discusses the Freudian take on art therapy and in her own works states, "art is therapy". She believes that the act of creating is an expressive release in itself. She does analyze work at times as well, paralleling therapists' from the literature review who claim that they

tend to use a combination of "art as therapy" and "art psychotherapy" (Horovitz-Darby, Malchiodi). However, being untrained as a therapist, Slutzky's analysis of children is used for her own understanding of her students. In one incident where she found disturbing imagery in a student's artwork, Slutzky sought the expertise of the trained school psychologist to handle the situation.

Slutzky discusses the right to left brain shift. When children are critical of themselves and their artwork she tells them, "That must be your left side-your analytical, and your left side is not in control. And it hates it. And it says, 'That's a rotten drawing!' 'Cause you're being free. Your right mind is just doing it! So you got your brain, you know (at) war with each other. And my job is-your job is to make a passage so it can go back and forth, back and forth, no problem." You know but it works! So it's, that's all. It's all psychology".

Art therapy and deaf children.

Several suggestions for modifications for deaf children were found in the literature review (Hurwitz & Day, 1995; Kunkle-Miller, 1990; Vaughn, Bos & Schumm, 2000). The literature suggests setting up the art environment for ease of communication. This includes arranging desks and tables so that deaf children may easily see everyone in the room. Using curtains, carpets, and closing doors will be effective in order to reduce background noise. It is important to be sensitive to each deaf child's preferred mode of communication whether it be manual, oral, written or a combination of these. Deaf children may require interpreters or note takers as well. When commencing art activities, try to be non-directive and leave projects open-ended so that students may respond how they wish. Also, be sure to provide a multitude of media and supplies from which they may choose. Hold questions until

children are finished with what they are working on to prevent interruption of the creative process. Unlike hearing children, deaf children must look away from what they are doing to respond.

Slutzky states that the only difference between her art sessions with hearing and deaf children was that she touched deaf children more because they were more receptive to it. She also states that she worked with deaf children longer so she may not have been able to make a clear distinction.

Suggestions for beginning art therapy.

Slutzky recommends taking psychology courses and reading Jung's Man and His Symbols to people interested in using art therapy in order to have a better understanding of art imagery for ourselves. Like Freud, Slutzky emphasizes the importance of "art as therapy" but she also finds significance in the imagery found in the art product. Qualities a person might need to possess as an art therapist are sensitivity, someone who has a love of art, a desire to work with children, to be inventive, and to be a life-long learner. In her dealings with art, Slutzky "refuses to use the word 'therapy' in front of students because it has negative connotations." Her ultimate goal is to make students comfortable and to treat children with respect and validate their work. There is a link here with therapists in the literature review who emphasize the importance of "creating an environment in which the client may comfortably create" (Herd, 1999). Slutzky also suggests working on self-images because she believes they are the "strongest technique" in art therapy.

Conclusion and Implications

Despite concerns about subjectivity that may be present in the art therapy itself, as a whole, the articles and interview showcase some common issues that are significant to the field of art therapy.

Through art therapy, feelings that are blocked for some reason can be expressed. This expression occurs as feelings move from the right brain to the left and often leads to a healthier self-image for the participants. It cannot be concluded that the therapy serves as a treatment for a specific condition. However, it seems to have had a positive effect on the patients overall and generally serves as a form of expression that is beneficial to them because it alleviates negative emotions. Due to the limited time that was allotted for a literature review, it would be recommended to expand the literature to achieve a more in depth analysis of the field of art therapy.

Procedures for Collection of Data

Procedures were taken to collect an ample amount of data to create an art therapy brochure in order to meet project objectives.

Collection of materials for the literature review occurred through using the research databases found on the Rochester Institute of Technology homepage such as Academic Search Elite, Arts and Humanities Search, and First Search (Education Abstracts, ERIC, Internet and PC Abstracts, and WorldCat), as well as the Internet resource Google. A search of the Wallace Library electronic catalog at the Rochester Institute of Technology was also conducted. The following subjects and words were searched: deafness, deafness and communication, deafness and socialization, deafness and art, art therapy and deafness, art therapy and communication, and art therapy and socialization. Criteria for selecting useable articles initially required that they be primary sources and that they represent art therapy as it is used with deaf children. Due to limited resources, the review was opened to studies of hearing children. A local art therapist was also consulted and suggested additional material and researchers' names which were included. Once the literature had been reviewed, information was

categorized and generalizations were made. Supplemental articles have been added to this initial literature review throughout the duration of this project. Limitations and future recommendations were also a part of this literature review.

An open-ended interview with a professional working in the field of art with deaf children was conducted (Appendix B). Adriana Slutzky, a former art teacher, was interviewed on how she used art therapy with her deaf students. Protocol for this interview included questions on the relevance of art therapy to deaf children for communication and other purposes, modifications that the therapist may currently use with deaf children and why they are used, and the results of her therapy. This data will be utilized to make adjustments to the art therapy exercises in the brochure that are used with hearing children for future use with deaf children.

Discussion

I believe that I have been successful in meeting the project objectives of creating an art therapy guide. Though information about art therapy as it has been used with deaf students was limited and difficult to find, I have created an art therapy resource that includes a general overview of art therapy, art therapy exercises and modifications for deaf learners, and resources for future use.

Limitations to this guide stem from the fact that primary sources and experiments or case studies dealing with art therapy as it is used with deaf children are rare. Though the information included here is accurate to the literature review and interview I conducted, a larger sample of literature and interviews would result in a more thorough product. I would also have liked to interview certified art therapists working with deaf children.

One important note to add is that this guide is simply a resource

to be used by professionals working with deaf children who are seeking an avenue to facilitate expression and communication. Any person who wishes to practice as an art therapist must receive the appropriate degrees and licensure. I, myself, am not an art therapist and do not predict specific results for the included activities.

I recommend a broadened literature review and multiple interviews with art therapists working with deaf children for future elaboration on this product or one like it. I would also recommend that more studies and experiments be conducted by certified art therapists due to the fact that so few currently exist.

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Author Note

Kamila L. Riscili, Master of Science in Secondary Education
Department.

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Correspondence concerning this project should be addressed to
Kamila L. Riscili, 27 Cottage Street, Westfield, New York 14787.
Electronic mail may be sent via Internet to [riscili77@hotmail.com].

Appendix A

Interview Protocol and Consent Form

Name: _____

Profession: _____

Degrees/School Name(s): _____

Experience using Art Therapy: _____

Experience working with Deaf Children, if any: _____

Questions:

1. What does 'art therapy' mean to you?
2. Based on your experience, do you feel that art therapy facilitates communication? If so, could you provide an example?
3. Describe the process that you generally use when conducting art therapy. For example, how do you begin the therapy? How long does it usually last? What methods do you use to analyze the therapy, if any? Do you work in collaboration with other professionals when using art therapy?
4. On what basis do you decide to use art therapy with children? Are there situations where art therapy has been particularly beneficial?
5. What do you feel has been the effect of your art therapy with children?
6. Do you conduct art therapy with deaf and hearing students in the same way? If different, how so?
7. What advice might you give to someone who wanted to begin using art therapy?
8. Is there anything that has not been addressed in this interview that you feel is important?

Consent Form

Project

Title: Art Therapy Brochure

Investigator

Kamila L. Riscili, Graduate Student,
Master of Science in Secondary Education
of the Deaf and Hard of Hearing, National
Technical Institute for the Deaf,
Rochester, NY 14623-5604

Phone

(716) 326-2709

Email Address

riscili77@hotmail.com

Thank you for agreeing to participate in an interview for my research project on Art Therapy. I am gathering data on the different methods of using Art Therapy with children in order to create an informative brochure for professionals who wish to use Art Therapy with Deaf children. Your signature on this consent form shows that you have been informed about the conditions and safeguards of this project.

1. Your participation is voluntary. You may withdraw from the study at anytime, for any reason, without penalty.
2. Information gathered at this interview will be used only for the purpose of research as stated above.
3. Anonymity will be granted if the interviewee requests. Otherwise, the interviewee's name will only be cited in the research paper. Please sign below accordingly.
4. Questions or concerns may be addressed to the researcher at the email address and phone number listed at the top of this page.

I have read the information provided and agree to participate in the interview for art therapy. I grant the researcher permission to cite my name in her research paper.

Signature _____ Date _____

I have read the information provided and agree to participate in the interview for art therapy anonymously.

Signature _____ Date _____

Appendix B

Interview with Adrianna ippeL Slutzky

April 18, 2001

KR [Question 1] What does 'art therapy' mean to you?

AS Um, first of all the word "therapy" insinuates that someone is in need of healing. So consequently, art therapy means that you, you know, counsel someone and use art as a medium. You know, access a child. That's how I see it.

KR [Question 2] Based on your experience, do you feel that art therapy facilitates communication? If so, could you provide an example?

AS I think, um art therapy is a wonderful way to facilitate communication because it can be done in such a way that the child doesn't know that he's actually communicating at the depth that he or she is. Like I mentioned before with the self-portrait. That you, everybody can choose one pose-that's the only thing you give them is the photograph. And then you tell them they have to put it in some sort of context, in a complete work of art that says something very personal about them selves. Without being really blatant about it, you know, no daggers, no blood, no...whatever subtle communication [unintelligible].

And so, um, I think that, uh, the reason I did these projects-you get incredible knowledge of what's going on with the child, inside, very deep and I also-at the Rochester School for the Deaf, I taught children from Hillside Children's Center. I would say, with special needs children like that and then hearing

children that I work with as well as deaf children, that I can probably tell you more about the child after two weeks of Art class than a lot of other people can who work with these kids-the psychologists...I guarantee it. But you have to be-I think you have to have a good base of psychology, you know what I mean? Understanding the children, you know, but-definitely.

KR [Question 3] Describe the process you generally use when starting art therapy. For example, how do you begin the therapy? How long does it usually last? What methods do you use to analyze the therapy, if any? Do you work in collaboration with other professionals? -just a general description.

AS For one thing, I would never, ever, ever use the word, "therapy," in front of the student or anybody who could even guess that. Because I think the word, "therapy," to a lot of students, means "mental illness" which has a tremendous stigma to other peers. And so anything I do, I would never call it, "therapy." Never, never. I find the word completely negative. "Art therapy," I would change that to something else. "Art-life lessons" or something positive. I think "art therapy"- "therapy" has some negative connotations to it. I find. I would never use the word, "therapy." Um, how do I usually start it off: I usually start off by, um, when I meet a student for the first time. Now I'm going by Hillside Children's Center now, too, you know, because I get those [unintelligible]. I will always start off the first class that I tell them that since I really don't know what their skills are I'd like them to do whatever they like to do best. Whatever-the best thing that they know how to do. I just want to see that.

Okay, and I do that really with all classes-draw, paint, you know, "Show me what you can do. And you have one class to show me what you think is like your best work." And um, the young children you access them that way. And um, by evaluating that, I usually-I always find something great about it. Even if it's very crude, you go, "That is such a great line, look at that light-dark-light. That is such-It's like it's alive!" You know? They look-they all feel good. It doesn't matter who it is, it's all very positive. Okay? And then, individuals-you think of a project that you are guaranteed that they all know how to do. You know what I mean? As far as difficulty-but also, some difficulty-but that they will be successful in that. And then slowly, even the really disturbed children who will not allow themselves to be touched at all without blowing up or throwing a chair-usually within two weeks or so if I have them, lets say...three times, four times, I can touch their shoulder and nobody shrinks back. Do you know what I mean? That's a building of trust. I don't touch them at all at first. I wait. And then I'll either-I give them the pencil. I test it, you test it [Interviewee demonstrates handing me a pencil and touching my hand], you know? I think so much has to come from the teacher as far as your knowledge-your knowledge of children. I mean, I had children. I went back as an adult so that was a benefit to me. You know what I mean? I raised children. But even if you don't have that-some real-you've gotta have a real educational and intuitive sense of, um, the boundaries of people. You know? Young and old, you know what I mean? So, uh, I always see children, I don't care how young they are, as real, individual persons. Not some, you know, "BLOB OF ALL CHILDREN" generalization. You know what I mean? That's and

that's usually how I start.

How long does it last? It lasts as long as I know that child. Because it builds from one to the other to the other. You know, I'm not quote, "a therapist." But if you're a good art teacher and a good-a good aura in the art room and it becomes really like a resource room and a place where the kids can feel free to express themselves...Because, in most, in all other classrooms now, I think, it's so regimented. There are so many standardized tests, so many things, that's about the only classroom where they can express themselves-about THEM, not about history, not social studies, not about the state of the world, but about the state of their hearts. You know?

Do I work in collaboration with other professionals when using art therapy? Well actually, I did a lot of that at the Rochester School for the Deaf because I found that if you have a classroom of kids and some don't get along-like it's just total...That, um, that's the most positive, way...again you know, bring quote, the word "therapy," which I hate-but the best way to have them learn to work together is to do a major project. So I have done, god, I don't know, fifteen murals at RSD...one large tile mural. And a lot of times I'll pick a class that's divided in half. One half can't stand each other and they won't work together. And then, I'll say, um, "You know, the principal, or this teacher said she has a very boring room and she would like to have a mural in there. So she gave us these four guidelines, she wants like, you know, the seven continents-or the four continents or whatever she's teaching" generally. So, we have to come up with ideas, all of us together, how do you, first I'll say, "How do you feel about that? It's up to you. It's a job. It's up to you. What are you

going to get? Pizza at the end." And they're going [facial expression showing surprise]. Because we always make them feel like they're in control of it. Even though I'm always in control. I think a lot of times the students felt they had a lot to say. You see what I mean? So then, if they all decide, 'Yes, we want to do this,' and mostly they're so excited because it's so great--so different, right? And then um, then I draw the, I put names in a hat, they pick pairs. "You research this, you research this, you research this...I don't care how you get along. That's what you have to do. And you have to be back here," you know, "in a week and you have to have rough drawings, okay?" So they all get all books and everything like that. And then, um, they'll, then they'll--they can Xerox some pictures that they think may work. And then, uh, when everybody in the little groups have their own, have all the research done, then we'll uh, we'll get together, we'll sit around in a circle and we'll say, "Okay, what do you have?" And we post it all on the, um, blackboard or something, you know--all the pictures. Okay. And then we delete, take, delete, whatever. And then we, uh, we research muralists and we say, "Okay, what design, like what style do you like? You know there's a lot of different murals. What style do you like?" And then they work that through and then um, when they choose the images they want, then um, then I'll say, "Okay, well, we have to do it on an 8'x 12' you now because you can always project it on the wall." Then we go, we first go to the wall and we measure the wall. Okay. And then we uh, we make up a grid, now this is the wall. Now this let's say you want to do an elephant and a frog or whatever. It has to be in some way it has to be in perspective with that grid. Or if the wall is like 20'x4' then we'll get a

grid that's 20x4 and they decide on the size of the animals or whatever. So it's math-it's everything. So the math teacher will help with that. And then, um, then they go off on their own and they make their individual drawings of what they think is right. And then we go through that process again of choosing and eliminating and then somebody always gets angry, "I want mine! I want mine!" And then we go, "Well, we like this part of yours, so we're going to take this part. And then we'll take this part and then that becomes a new one." "But I want all of mine!" "But you can't, you work together. This is a mural. But then it would be your mural. This is our mural." So then it becomes a whole "our, your, ours" You know what I mean?

KR It becomes very realistic.

AS It becomes very realistic, and it becomes-they get it. This is not just my thing, this is our thing. Even that girl I hate or that guy I can't stand, you know? Then I make sure that I always give it value, okay? So, because this is it's a lot of work. And it's valuable. But in their eyes, too. I want it valuable in their eyes and I want them to see it's valuable in other adults eyes that they're with. So then we always have either the superintendent or the assistant superintendent and the principal...they come down, uh with the teacher and the kids present either two or three ideas for that mural. And they present it to the adults, and they choose who wants to represent and give the little lecture. And um, and that's like, anyhow, I'm giving you this whole thing. But it's uh, and from there it goes, you know to corrections...and the principal will say, "I don't like

that, that, and I don't like the way that looks..." Okay, then we mark that. It has to be changed. And so it will be, it stays the same but it's changed. What you do in public life too, like with my sculpture out there. Here and there I have negative spaces...They said, "Well, Kids will climb..." "You're right, forget it." So all these things, and that's how it's done usually, in business. And then from there, then we walk, we usually we decide on colors. And then we, uh, we get the charge card from the school and we walk to a paint store, and they have to, my deaf children, I make them go and, uh, they have to prepare. First they go without anything. And then I go, "Tell um what we want-it's your project, right?" I'm just like, "I'm here to support you but you tell them what you want." "How, I can't talk?" "Well, where's your paper and pencil? Where's your..." "I forgot." "That's not good. Well good. I've got some with me. Here it is-go." See what I mean? And so...

KR They're held accountable.

AS And they're very ill at ease with that. Very ill at ease with that initially. But all that, see, but that's fine. But once they do it all... Anyhow, the whole idea is from beginning to end when it's all done, and I do a lot of work when they're gone, I touch up here and there. And they know it. "Can you do that cause we can't do the is and it's hard." You know? We had a couple of hard murals. And the scaffolding, we'd take turns, you know? Two at a time. I mean it's very responsible stuff. We did the gym, you're talking about-it's like twenty feet high, you know. So when it's busy work and they know when you put serious responsibility on

them, uh, safety-wise, everything. And so the self-esteem that they get out of that is so much more than the self-esteem that's passed out-like report cards nowadays, which means nothing to them because they know it's bull... You see? So to me, to me good teaching should all be something that makes them should feel good. And something that fosters self-esteem, but that's *earned* not given to us, you know. My personal feeling is that one of the, uh, errors that we have done with our children-all children, is that we have tried to give them self-esteem on a platter. And it's not working. They haven't earned it-they know it. You know? So they have some 'schlocky' piece of work, and you go, "that's great!" [Sarcastically]. No it isn't. You look at that, you go, "You know, you can do a lot better than that. I want you to redo that." Do you know what I mean? I mean it depends on the age, you know what it's like...so to me, it's all, its' alike...what's another word for that...it's all that. And then, so I do work with teachers, and then principal...do you know what I mean, math questions...um, personal-paint store, maintenance, you know they have to email maintenance, "Could I please borrow a ladder for like, three weeks, could I please borrow a drop..." So yes, I do, that's great. So they learn.

KR And like you mentioned before you went and spoke with a psychologist when you thought it was necessary. [On first meeting, the interviewee discussed a situation where she noticed some disturbing artwork and showed the school psychologist.]

AS Yes, yes-that too. But, you have to have a good psychologist. I have, I think that, uh I think that psychologists-their roles

have also been reduced, like a lot of teachers, so I can't really blame them, to a lot of paperwork. And a lot of um, I think they're doing the testing, or whatever they're doing...some sort of monitoring. I do know that there is a lot less counseling-individual counseling. A lot less counseling one-on-one, and a lot more paperwork. Just like what happens with teachers, you know? Overwhelming paperwork-what happened? You know, what happened to the children? It's like, everybody talks children, but...everybody talks children, but you still get paid a lot less than in business and uh, you're overwhelmed with paperwork-not with planning lessons for your children, but simply paperwork...and you're going...[scratches her head in gesture] so tell me the real value here, paperwork and um, um, business. Definitely not the children, really.

KR It's sad.

AS I find that sad, yeah.

KR [Question 4] On what basis do you decide to use art therapy with children? Are there situations where art therapy is particularly beneficial?

AS I use art therapy, especially when there are children who have social problems-social interaction problems. Or if they have um, obvious, um, low self-esteem. Or obviously, severely, mentally troubled in some way. You know what I mean?

KR [Question 5] What do you feel has been the effect of your art

therapy with children?

AS I think that um, the children I've worked with, a lot of the children, I think they feel better about themselves...um, they love me, which is nice. Uh, I've been gone for almost a year and I went into do the life molds, you know. [The interviewee had previously explained her current project where she had to take molds of several children's faces and hands]. And they're saying, "Where've you been? I've missed you!" They know I've retired, they just don't want to believe it. And um, I think, what I hope I give them is a sense of their uniqueness, and an appreciation for art. All art-you know? An appreciation in the sense that even if they might not have been successful at it or liked it that much, that they sure know how hard it is...and when they see something they go, "Whoa, I know, that's hard." But that's like...my favorite thing my kids used to do-we went to the, uh, museum-art gallery, [unintelligible] -the scholastic show, and they say, "We've done that. I know how to do that. I know how to do that." You know what I mean? I taught them a lot of things so that they could choose which was their-you know, best art-some kids can't paint, some kids can't really do 3D. If you expose them to all and then you give them one independent project at the end. "Use what you want, do what you want. Give me..." I used to tell them, you know I had a, like, worksheet, it's like a contract, 'What are your plans? What supplies do you need? How long do you think it will take?' So that when everybody, at the very beginning of the year people would know some things you like, some things you probably won't like...however, "by the end of the year I'll give you like four weeks to do exactly what you want."

So you can choose, you know after this whole year, you get to choose what you think you like. Start thinking about your final project." So they always have control, you know? And if you had somebody who loved printmaking and wanted to get into that, how wonderful is that? Or batik, or anything. And I have it all set up-different stations. "What do you want?" But I want it on paper. It's self-governance, you know, as much as possible. Yeah, I think that um, I think it's possible that lot of our kids are angry because they are told to do, even though we don't think we tell them anything, by society they are really told a lot. And it's becoming very constrictive, I think you know? So, yeah it's great, I love it.

KR Well they're told that they need to be responsible but then we don't give them opportunities to be.

AS We don't-exactly. Not real responsibility. "Be responsible, pick up your room, be responsible, get an 'A' on your test." But not all kids can, you know I think art-the word, "therapy" -I think it's so broad because I really, when you say, "When do you use art therapy?" I use it all the time. Art *is* therapy for me. You know?

KR I'm beginning to see that myself.

AS Exactly! And once you see that you can see it for your students too. But I would never use the word with them-ever. And if I had a position as, I don't know, an art therapist, I would just find a different word than "therapist." Because uh, kids already know

when you're going to counseling. "Oh, you're seeing a counselor. You're doing this, you're doing that...What's wrong with your head?" You know, it's that whole thing. And it clouds art. And I think it's uh, if you do it right it could be the deepest therapy. And the best way for them to find out is for themselves to see it. You look at that and you go, "Whoa, that tells me a lot about you, that's very interesting..." Whatever. "How do you feel about that?" You know.

KR [Question 6] Do you conduct art therapy with deaf and hearing students in the same way? If different, how so?

AS The only thing different with hearing and deaf is that I touch deaf children more...because they're so touch-oriented, it's in their language. So I will tend to...[Interviewee demonstrates taking a pencil from a student and touching their hand]. Hearing kids too, but for deaf children, there is uh...the reason I love working with deaf children is because there is that sort of um, accessibility, you know through expression and... They don't hide much, you know? Where as...

KR They're very open.

AS They're very open with their...so you can read their body language and expressions so well. You know? So not touching like physical, as much as just access into the eyes and the mind, you know, their feelings. And with hearing kids, um, uh, you know, it's more easily if you have great verbal skills to shut your face down. So, in that way, I'm the same way, so I'm very expressive,

you know with talking...you know the whole thing, cause it's my, it's my natural way anyhow. So, it's a perfect match with the deaf. Yeah, so um...the only difference is, for me, I don't think, well, maybe I'm the same, I'm not sure. I-I, actually I think I did more art as therapy with a-uh, with the deaf, but I've worked there longer. You know what I mean? So I'm not sure how I would have been if I would've stayed in a school where I would've had hearing students. So, I don't know.

KR How long did you work in a hearing school?

AS I worked there, uh, two years full time and then uh, well one year...almost three years full-time. And then uh, one year substituting various schools, you know what I mean? So it's uh, so I didn't get into my real, mature, you know-art teacher understanding everything until I was older, you know, until I was at RSD. And then I grew to that. And I saw the need for it. Which I might have seen at other schools too. Because a lot of kids, I mean students and things now, you know, with all kinds of handicaps, or other conditions, uh, mentally challenged, whatever. But, um, I found, I found the most-the strongest technique ever-is to do self-images. So even when I went this time, to all the different schools we went to in the city to do the 'Life-masks,' the kids were fascinated with uh, just seeing themselves. One black girl said, "It's so strange! It's like looking in a white mirror!" It's all...it's all-they're seeing white on the table. So that's really, I thought, 'What a neat thing to say!' Yeah, interesting. And she kept saying, "Like this, like this..." You know? So, I would've never thought about

the color white, but she just saw it. "This is how I would look if I was white." And it was so interesting. So, I mean, if you work there, you could do so many things. You know? But a-a lot of...a self-study is wonderful because I think, and I tell...I used to tell all my students that...I...this is my true belief...that once we are...um...maybe uh...five years old-six years old, we stop looking in the mirror basically. And we have this picture in our heads of ourselves but we really don't know what we look like.

KR I've heard someone say that before.

AS Yeah! Because I don't think-after a certain age, you know, we're made to feel self-conscious about our bodies. So I don't think we ever really study our body anymore. Uh, I don't think we really see. And uh, and um, I think that uh-I tested that once at the Rochester School for the Deaf when I put a mug down, I said, "There's a mug. You're gonna draw it." And the kids were sitting across from me and I turned it like this [Interviewee turns handle of her mug out of viewer's perspective.] "Here's a mug. Got it guys? Here's a mug, okay. Simple shape. Draw it and see if you can get the shadows." And they drew it with-some of them, more than half, drew it with the handle on-which was away! So then I'd say to them, "You see? What, what do you see?" "It's a mug." "But see, you don't see. All you-you recognize. It's different. You recognize. You know, but you don't see. There's a big difference."

KR That's very tough to teach.

AS Yes it is. It's great! And then they go, "Ahh!" And then, the other, uh, I forget...the other great thing I did that was wonderful therapy, if you want to call it that. I hate that word, but I'll say it anyway. Was um, uh the kids' worst critics are themselves. "I can't draw, I'm terrible! Oh-mi-god I'm terrible, I can't draw!" And they won't do anything. So, I start, I start the drawing with uh-at all ages-I start 'cause every year I start I have to warm them up with everything. And um, I will um, I will tell-tape paper to the table, and at first we'll talk about contour line, that they know what that is. And then um, "Get your pencil." Or marker actually so they cant fudge. Big, black marker or something, right? And then, you cover up the hands with uh-aprons. Cover them all up. And they're going, "What are you doing?" I go, "I don't want you to look. I don't want you to look-just, okay now, see that? I want you to draw that in contour line. Don't look..." You know? "Every time your eye travels an inch, draw an inch. So, study it like that." Okay. Then they all do it. "Keep your hands-keep it covered." And then we're all done. Without looking at it, I'll say, "How do you think your drawing looks?" Some will say, "I think mine's good." And some will say, "Mine's awful! Uh, mine's terrible!" And then, and then, we'll say, "Now, so why would you say that? What part of you is telling you that your drawing is not good? You haven't even seen it! So where does that come from?" Because we talked about the self-criticism...how that stops people from achieving anything. And they just go like, "Doing! I got it." Like, "Whoa, I do do that to myself." You know? And then you take it off, and then you hang um up and they go, "They're great!" Because all contour lines are great. You see? But they learn, they see

clearly, that it's how, how terrible they are to themselves! I'm going, "What voice is there, it must be you're left brain-left side of your brain." You know, with that whole thing, you know left/right side? You know.

KR Yeah.

AS I talk to them about it, you know. The theory of that, right. I'll say, "That must be your left side. Your analytical, and your left side is not in control. And it hates it. And it says, "That's a rotten drawing!" "'Cause you're being free. Your right mind is just doing it! So, you got your brain, you know [at] war with each other." I says, "And my job is-your job is to make a passage so it can go back and forth back and forth, no problem." You know? But it works! So it's, that's all, it's all psychology. You can do everything that you ever learn in college. You can do it. And they see it, you know? And then, then they... and then if they do it you go, "Humm, left brain." And they're going, "Agghh!" And, you know, but they'll continue 'cause it's fun! 'Cause now they see that there's a battle in their heads. And then they'll fight their own battle. It's fun. It's a game.

KR That's a great way to demonstrate it, too.

AS Oh yeah, it's great! Yeah, it works. Yeah, so, that's one I did every drawing-the beginning of drawing class, every drawing class. Or even if you start a regular drawing and they're saying, "I hate it, I hate it!" Then, do it. Somewhere in the middle-boom-break. "Do this." And then do it. And they see it and

they're going, "So?" "I'm not telling you it's not good. She isn't, he isn't. Who's telling you? And how, how do you know? Tell me how you know." "I just know." You see? "Think about that." And I talk about, you know, how the mind...that's why it works, it's great.

KR It sounds great.

AS It's great, yeah.

KR I'll have to try that sometime.

AS Yeah, it's, it's really good. And then, and then you take the contour drawings, they're also weird and then you um, you Xerox them, you reduce them, whatever. And then, um, like especially if you do-I always do where they pose for each other, they do contour drawings and some are real funny and some are not. And uh, we do like maybe ten, each, you know. And then they can pick out uh, the best one. Then we Xerox them. We reduce some. Some we make larger. Then we pick up like three at random. And then we say, you know, three different sizes. Just at random. Okay, now, then you can talk about, you know, foreground, background...Cause then you got the different, you know, diminishing sizes...And now they have these funny figures that they know they're their classmates. And I say, "Oh, Alright, I want you to make you know uh...a story out of this for me. What's happening here? Who's the- what's this person doing? What's that person doing? Where are they?" So you always like um, you al-you take something that they've done. And then...you...take that and extend it into something

that they have to think of-but it's fun. You know? Well now, "Let's see, he's on the bridge and she's gonna jump and she's gonna...whatever. It doesn't matter. But they go, "and that's you, you see that's you-remember, you drew that picture?" You know, it's great...they're thinking. So it's-I think it's just wonderful. If you're into it it's great. Yeah, I think it's great.

KR [Question 7] What advice might you give to someone who wanted to begin using art therapy?

AS I would um...take uh...some psychology courses for sure. Child psychology-so you understand how the brain works. Um, um...I would definitely...I would definitely read Jung's Man and His Symbols because it talks about the uh, you know subconscious, uh, images that we have...that is uh-that he believes is universal, and sometimes those are. In a lot of ways actually they are. Yeah, yeah. So, Man and His Symbols-that was a great book. And then, you know, just basic psychology. You know, interpersonal relationships, you know what I mean? Everything. It doesn't have to be a high psychology. Just like, really understanding relationships...and how, how socially how things work. You know, understanding. And then just be open with the kids, you know? So, mmm-hmmm.

KR [Question 8] And the last question is: Is there anything that has not been addressed that you would like to add?

AS Hmm. I think if you don't love art-and if you're not sure about children-you shouldn't do it. 'Cause you'll do yourself a

disservice. And if you're not a life-long learner, you might rethink that too. Because I learn most-I learn-90% of what I do-I learned when I as finished with college. Yeah. And, uh, but I was always an avid reader. See what I mean? So, uh, there's wonderful books out there. You know? Um...just keep an open mind. And then also-in my situation where I worked at the Rochester School for the Deaf, you have the same children, like First grade through High School. So you better be a very inventive teacher, or you're doing a great disservice to those kids. You know? I mean, you can teach drawing...but you can teach it more-in just, in ways...you can continue to build on the drawing skills-with an interesting project. You know, and um, and don't make it you know-make it challenging. You know you just have to get the right amount. I taught-I learned drafting [unintelligible] because some kids needed to have that base. Computer Aided Drafting. Umm...I learned uh, about animation programs, you now. Uh, my husband taught initial course of animation and then I bought, uh researched the program...actually I got it from NTID from [name]. He gave me a...program. So, what I'm saying is that even if you know painting and drawing and the basic crafts you know-I don't [unintelligible] crafts but you know like art crafts. You know, like batik-painting in uh, wax. Then, you know, you also learn computer...you now what I mean? Then you know-you also learn computer...animation. Like, what's new. What could they use or chose as future employment? And it's your, it's your duty, really, to expose them to all these things. You know? 'Cause you're the only art teacher. Most schools have...like we went to Nazareth, and they have like two art teachers...you know...three-one 3D, one this, one that...you know you're the only one. You have a

lot of responsibility. 3D and 2D. And, and the technical parts. You have Illustration...you now. Yes. So it's uh-you have to be a life-long learner. And you have to love it, or it's-it would be too overwhelming. And I think, um I think art therapy, you know, in the class room, I think it works when they know that the teacher is very sensitive, too-and that the teacher can be trusted-and that the teacher does have control of the classroom, so they feel safe. So, if you have someone who really doesn't know what she's doing...and, she's not really comfortable having some discipline in the classroom, and is too 'loosey-goosey,' the kids won't feel safe-they won't do it. It's like having a home base. And they need a solid base where they feel comfortable. Because the other-the other thing that-that I always did, which sounds minor, but it's really-I think it's major...When you have kids who are really explosive...I will um, I will always uh, I will send them out of the room. And I'll say, "Just wait for me in the hall. Just cool down a bit." And I will always, um, talk to them in complete privacy-complete privacy. If there's no privacy in the hall I'll ask them to come back after school so we can just talk about it. So, I won't corner them-so they lose face. Do you know what I'm sayin'? I will say, "Get out, now." I mean, "I want you out, NOW." You know whatever, "Enough. Okay tell me, what's up? What's the problem?" "Nothing." "Well something is the problem, now talk to me." And I'm very ca-very soft spoken...I'm very gentle, you know-until I can touch them. And then-then access generally that way. And then I know I can access them. Then uh, generally, uh, that's a major rule-I think-not corner somebody-and they can lose in front of their peers. I think that's a real important rule.

I think that's a real important rule 'cause they will hate you. And they'll get you back. I mean, I would too! My God, you know? It's the most uncomfortable feeling in the whole world. So that's-if something is done...if something is really serious that has to be discussed, if you're really upset about something, then, uh, you either meet the child for ten minutes during lunch, then you talk one-to-one, you say, you know, "This is my feeling, talk to me. How can-what can we do to make this better for both of us?" You know? And you may have to do it more than once but it works. It's respect, you know?

KR It needs to be there, just to teach in general.

AS Yeah. It's a job. But it's great. If you, you know-I loved it, you know. It's not that it was easy, because I could see that it's not-not easy. Especially all the things I taught. Like three dimensional, you know, and then all the big projects that you work on after school and say, "Why am I doing this? Oh my God!" You know it's so incredible. Because the kids can't do *everything* you know. Sometimes you gotta touch up here and there. They beg you to. You know, I'm saying, "Jesus, I'm fifty and I'm climbing scaffolding...what the hell is wrong with me?" And I tell the kids that and they say, "Awe, that's good!" And then when, when-when they, umm...when they, umm...know that you really care for them and respect them you get that back. Uh...there was one...incident, one time, where I had a really hard group, hard class. A number of years ago. A very difficult class that didn't get along together at all. And they said, "You can't teach these kids..." the teachers said, "Oh, you can't teach them anything...they're so

immature...they're so..." -they were like fourteen-thirteen, fourteen. And so I um, without permission now 'cause it's m... I decided to paint one wall in my art room. It's my art room. It had not been painted in fifteen years or something because it's so old. It was like-yucky yellow. So I-you know I'm not gonna hurt this wall here at all. So I told em that-that we were going to um...that I thought this art room was in pretty bad shape-that we should paint that wall. They were like, so motivated. And ahh...we thought of ideas, you know, we had like a narrow strip and then a wide strip by the sink. And they came up with an alien idea. And I go, "I can't look at that every morning guys it'll make me crazy!" But I told-they understood. The-I had a T-shirt from one of the islands with a palm tree. And I said, "How about a palm tree T-shirt?" "Okay" you know. So I brought it the next day. So they did a palm tree and a dolphin jumping up so you walk-and the bottom is all water and the top is all stars and planets...it looked great. Anyways, I told the kids, because they were an extremely difficult class...I told em that they had to prime the wall first. Now I'm doing very basic stuff first. Just to see how they get along here before I, you know. And um, they're priming the wall, and um the principal comes in-who never comes in normally. And uh, mind you I have a class nobody wants, okay. Most art classes, I mean a lot of times you get the class nobody else wants. And she said uh, of course her manners-I mean she has a good soul but she has terrible-her people manners. And um, I'm telling this story for a reason. So um, the kids are all painting, they're all rolling the wall and um...and then started to do the palm tree and everything...And said um, "What are they doing? Why are they paint-what are they painting? Why are they

priming that wall?" Just like that, you know. And I said to the kids, "Answer. Answer her please." And they said, "Well we're painting the wall so we can get ready for the paint-for the mural." She goes, uh, "What're you gonna do?" They said, you know-got the drawing out that they had worked on for at least three weeks-you know the palm tree, the dolphin-all the research like I told you before. The earlier conversation. And she said um, she said to them, " Well that's stupid! You don't have to prime that wall! It's a waste of time!" And I looked at her, and the kids looked at her, and I-and then she said, she goes, "Who thought of this design? Was it her?" And she points to me, right? You know, the art teacher. How rude, right? "Was it her?" And then they said, the kids said, "No. Gail thought of this...Elizabeth thought of that. And we thought of that... and we thought of that..." And she goes, "Oh." And she walked out, right? Mmm-hmm. And I closed the door and the kids looked at me and I looked at the kids. And the kids said to me, "What's wrong, what's wrong?" I said, you know I thought to myself, "You know, they should learn how an adult deals with that type of behavior." Right? They should learn how it's done. And I looked at her-they should learn how it's done because you know, they're the rude ones in the adult world. So they go, "What's wrong, what's wrong?" They all came off the ladders, right. They go, "What's wrong with her? What's wrong with this?" I go, "Nothing is wrong." I go, "She was rude. This is my art room, this is, we decided on this. It's our right to decide this. She had no right to come in here and say, 'What are you doing? This is a waste of time.'" I will talk to her later on when the class is finished. And they went, "Really?" So, pretty well she killed

the class. I was livid. I was livid. 'Cause this is the class that nobody can deal with and I'm dealing with it great and you dare do this to me? Right? So um, after class, "You gonna talk-you gonna talk to here?" I go, "Yeah." "Are you angry?" "Yeah, I'm upset. It's rude. It's not right. I'm gonna talk to her." [unintelligible] That's why I know about that. We're talking about respect again, alright? So I went up to her office and um, and I said, you know I'm not as livid as I sounded 'cause I'm in control, but I said, "Don't you ever, ever come in my room and destroy my class room again. Ever! How dare you?" And she goes, "What, what are you-what are you talking about? I didn't do any..." I said, I said, "I'm painting a mural, I'm telling the kids what to do...You're questioning-that I know what to...How many murals have you painted?" I said, "I've painted at least thirty five. Your gonna tell me *in front of my students* that what I'm teaching is wrong? How dare you? You know when you left the kids were saying, 'What's wrong? What's wrong?' You destroyed my class. I had forty minutes wasted out of an eighty minute class. How dare you do that. Never-never do that to me again!" I was livid. She said, "I didn't-I didn't..." She said, "You misunderstood." I go, "No, I didn't because the kids asked me, 'What's wrong, What's wrong? Why is she mad? Why did she...' No." I said, I said, "That was rude and obnoxious." You know. And she goes, "I'm sorry, I'm sorry, I'm sorry." And so um, anyways, walked out. For the next week she came in every morning, "Hi! How are you doing? I'm sorry! Are you still mad at me?" "No, I'm not mad at you as long as you say you'll never do it again..." And the kids came to me the next day and said, "Did you talk to Ms. [unintelligible]?" "Yes." "What'd you say?" I

said, um, "I told her it was rude and that she had no right to do that." And they go, "What'd she say? Did she apolo..." "She apo-she thought maybe I misunderstood but then later on she apologized." I said, "Because you guys sensed it too, right?" They go, "Yeah, it was-" "So she apologized. She felt *bad*. She said she'll never do it again." "Oh." I thought, "What a good life-lesson that is." I think it's wonderful. See what I mean? Because you can hide that, and archive it, and the kids never know-especially deaf kids because they don't have the hearing-to hear." They never overhear anything.

They never overhear-so, you just-and I'm not gossiping about the principal. I'm just telling them how I handled that situation as an adult. You know? And those kids are my favorite kids now-even now. They're graduating this year...Eliz-she still comes to me. She's like my daughter. She gives me a hug. [I've known her] since she was seven years old, you know. And Dale is like, he's a man, you know. And he's been in love with me since he was like six years old (laughter). You know how kids fall in love with their teachers or whatever. He's like this softie. He's like this big now (motions)-much bigger than I am. And it's like, yeah I remember, I remember, you know? And that lesson-they remember that too. So, you know as a teacher...they have as safe haven-they know you will back them up. And that-that there's not going to be-there's not going to be cruelty or that kind of bullshit in your classroom while you are there. Do you see what I'm saying? You have-you have to feel like it's home. Well, they might have a horrible home. You have to give them the semblance of a non-dysfunctional home. 'Cause a lot of them do have dysfunctional homes. I'm afraid to say.

It's sad, I know. I've come across a lot of different situations in my teaching-just in my student teaching experience.

Yup, yup. And that gives you a lot of understanding too, you know. Though generally, my rule was that I would not read any IEP of any student I got up to my classroom because I did not want to have presuppositions about the child. And the only presupposition I want-or I think I will learn myself the first day-which is 'do you favorite drawing. What's your favorite thing? What do you enjoy the most when you're home, you want to do something, what do you do? And then, I can tell a lot by, you know what I mean? But I don't want the presu-I don't want 'Well this kid was kicked out of school in Buffalo...and this kid...' I don't want to know all that because then you come to my classroom, and I'm seeing you with those eyes, which are saying, "Oh, here comes trouble." And maybe in my...and a lot of those kids that are in trouble in a lot of those other classes are angels in the art room because they're...they're that kind of a "hands on" type of student that doesn't work in a academic classroom very well. You know? And they have the motivation. Yeah. And they can move a little bit, they can walk and get a little water. They can get their paint and not (gesture) you know? I mean you talk about ADD or ADHD, I mean, my God. Those are hard classes where there's academic-and you sit! So good luck. You know. I mean we have all the learning styles. We have everything about kinetic...but I'm not sure...I think we still have to apply that in a much better way. I think art applies all of them very well. I think it's inherent in art, which is great. You know, but I think uh, with a lot of other areas, it's um, hard. Like math, you know?

[Tape ended and interviewee and interviewer decided to end here.]

Appendix C

General Project Product

Encouraging Communication with Deaf Children

Through Visual Art Activities:

A Resource Guide

Art Therapy

Art therapy is a form of expressive therapy that engages participants in producing different kinds of artwork where creative abilities are used in some way (Herd, 1999). Expressive therapy may include music arts or play therapy, however, here, the focus is exclusively on the visual forms of art therapy (Herd). This includes, but is not limited to painting, drawing and working with clay. Though traditional art media may be used to create the art, the emphasis is not on the conventional, aesthetic function of art in our society, but rather on the expression that occurs as a result of the therapy. This created artwork may be analyzed by the person conducting the art therapy in order for him or her to better understand the participant, however, here the focus is on simply promoting expression.

Two Philosophies

Art therapy as it is used today began in the 1960s with Margaret Naumberg. She believed that art therapy is rooted in both Jungian and Freudian ways of thinking (Herd, 1999). Jung's philosophy is closely related to the field of Psychotherapy because of the emphasis that is placed on analyzing and interpreting the images represented in the artwork. Here, it is thought that through the interpretation of images an art therapist may help the patient.

According to this "art as therapy" philosophy which follows Freud's beliefs, though psychoanalysis is important, the strength of art therapy lies in the act of creating artwork because it serves as an

expressive channel. This process of experiencing subconscious desires through art, is known as "sublimation" (Landgarten, 1998, p. 240). Most therapists today use a combination of the two philosophies.

Expression and Communication

Art created in therapy serves as a channel for expressing the participant's thoughts, ideas and feelings. Art therapy may facilitate communication in patients who are unable to communicate as a result of an emotional or psychological "block" or it may serve simply as communication channel for patients who cannot physically communicate in other ways. As a result of this, some art therapists have found that art therapy expedites the process of psychological or emotional healing. Often, when the participants are unaware of their own feelings, expressive therapy serves as a means of bringing those feelings to the forefront. This obliviousness is usually a result of a subconscious block due to an overwhelming emotional quandary.

Art is used to transfer feelings from right brain to left brain, bringing them to the forefront. It is evident that the creative function resides in the right side of the brain while the language function may be found in the left (Silver, 1978). The art itself is often an unconscious representation of the participant's feelings that are initialized in the right brain. Upon seeing the art, a participant may realize his or her feelings in a more conscious manner, allowing him or her to verbalize about them (Silver). In this way, there is a shift from the right brain to the left.

The expression of feelings through art therapy seems to alleviate the negative emotions that put strain on the individuals undergoing therapy. In one study that was conducted, individuals with disabilities were interviewed and asked if and how art therapy programming had helped them. Eighty percent of these individuals reported that art

therapy had given them more positive self-esteem which had also contributed to meeting new people, developing new friendships, and enhancing social skills (Lynch & Chosa, 1996).

Significance of Using Art Therapy with Deaf Children

Considering the many different communication issues that follow deafness, such as the varying ages of acquisition of language and its affect on how well deaf children learn language, and the multitude of psychological problems that may occur depending on the parental, social and emotional situation of the deaf child, it seems that art therapy has potential for benefiting them. One therapist working with deaf children claims that art materials are a great way to change the way families communicate and function (Horovitz, 1991, p. 111)

Art therapy works well with children in general because the materials themselves are intriguing and children tend to want to use them (Herd, 1999). When children resist an activity the therapist may have set up, the therapist may resort to other kinds of therapy. This is known as a "creative arts approach" (p. 3).

Possible Limitations of Art Therapy

It is important to remember that the information in this guide is meant to be used as one approach to facilitate communication, however, specific results are not guaranteed. Although these exercises may be used by educators in a non-formal setting, any person who wishes to practice as a professional art therapist must obtain appropriate degrees and certification before doing so.

One issue to consider before using art therapy exercises is to be aware of your personal bias. You should attempt to assume a neutral role when working with children. The phenomenon known as "countertransference" (Horovitz, 1991, p. 111) may occur when therapists' personal feelings and expectations become entangled with

the clients' artwork. The easiest way to ensure an objective approach to art therapy may be to stick with using the "art as therapy" philosophy and avoid interpreting or analyzing artwork.

Conclusion

Through art therapy, feelings that are blocked for some reason can be expressed. This expression occurs as feelings move from the right brain to the left and often leads to a healthier self-image for the participants. It cannot be concluded that the therapy serves as a treatment for a specific condition. However, it seems to have had a positive effect on participants overall and generally serves as a form of expression that is beneficial because it alleviates negative emotions.

Suggestions for Beginning Art Therapy

Slutzky recommends that any person using art therapy have a love of art, be sensitive, inventive, have a desire to work with children, and be a life-long learner (Appendix B). A person may also want to take some basic psychology courses and read Jung's Man and His Symbols. Slutzky emphasizes treating children with respect and making students comfortable. In fact, she refuses to use the word, "therapy," in front of children because she believes that it has negative connotations.

Art Materials and Room Setup

Though art spaces and media may vary from person to person, when having an art therapy session, it is a good rule to create a safe, comfortable place in which children may work (Appendix B). A large, flat drawing surface or easel in an area with plenty of space to move around freely in is preferred. You generally want to keep the room interruption-free and to work in natural light when possible (Malchiodi, 1998, p. 80).

When it comes to materials, supply a variety of media and paper

choices. This is key for art therapy because the different qualities of the media may be used to express different emotions (Malchiodi, 1998, p. 80). For example, paint is a more fluid, less exact media that might appeal to certain children more or less than using something more precise, such as pencils. Some basic supplies to get started might include (p.94):

White drawing paper (18-by-24 inches), pencils and erasers, felt markers, oil pastels, chalk pastels, scissors, white glue or rubber cement, masking tape, watercolors, tempera or acrylic paints, palettes to mix paint, a large jar for water, a sketchbook for journaling (9-by-12 inches), a notebook to write down responses to images, and collage materials (magazines, cloth, string, found objects).

Modifications for Deaf Children

When working with deaf children in any setting, it is imperative that the necessary adjustments are made so that communication may occur without interruption. To begin with the physical environment, it is important that all persons can easily see each other. You may want to move desks into an arc, or you may want to work at a round table if in a group. When working one-on-one, sit across from each other. Also, be sure that there is adequate light in which to see. Carpeted rooms, curtains and keeping doors closed will help eliminate background noises that could interfere with communication as well (Vaughn, Bos & Schumm, 2000).

Find out what method of communication is preferred and most effective for the individual you are working with, whether it be manual, oral, written or a combination of these. A child may also wish to use interpreters or note takers. Using non-verbal communication techniques such as modeling art processes and gesturing are effective

as well (Hurwitz & Day, 1995; Vaughn et.al.). Check to see if the child understands by questioning, repeating and rewording (Vaughn et. al.).

Be sure to make eye contact with deaf children and if more than one child is present, take turns raising hands and announcing who is signing or speaking. If discussing artwork, be sure that you do not interfere with the creative process and try to hold questions until work is completed. If it is necessary to interrupt, ask quick-answer yes/no questions. You may also draw facial expressions on a sheet of paper and keep it close to the child's artwork. The child may then easily point to how he or she feels instead of looking up to communicate (Kunkle-Miller, 1990).

Children should be comfortable where they are working. Let them sit in the area of the room they prefer. If possible, try to work in a room with a sink. This will allow maximum privacy for clean-up and help to maintain the feeling of a safe environment (Kunkle-Miller, 1990). Also, be open to letting children work at their own pace and to play if necessary because it is another form of expressive therapy (Kunkle-Miller).

When working with deaf children in art, use a non-directive approach to activities and provide a variety of expressive arts media for them to choose from (Kunkle-Miller, 1990). "Emphasize visual and tactile experiences" through using rhythm, pattern, motion, sequencing, space, and by being body aware (Hurwitz & Day, 1995). Deaf children often prefer working with three-dimensional materials because they are easy to use in a dramatic manner. If making puppets, consider placing them on jars so that children's hands are free to sign. Plasticene clay may be a better option over ceramic clay because it leaves hands cleaner to sign with (Kunkle-Miller). Washable face paint is great to

use with deaf children because it masks their personalities and can enhance non-verbal body language at the same time (Kunkle-Miller). Self-portraits are also a great art therapy project because they produce very strong images (Appendix B).

Art Therapy Exercises

The following art therapy exercises may be found in their original form in:

Malchiodi, C. A. (1998). The Art Therapy Sourcebook. Los Angeles, CA: Lowell House.

Scribbling with your eyes closed.

Have children close their eyes and scribble on a piece of paper for about thirty seconds. When they open their eyes have them look for any shapes or images in their drawings. Tell them to focus on this image and to add details to it as well. Children may title their drawings if they wish (p. 107).

Mandala drawings.

Tell children to draw a large circle in the center of a white piece of paper. They may fill in the circle (using chalk or oil crayons) with shapes, colors, and lines that appeal to them. When finished, have them repeat the process using black paper. They may then hang their two drawings and contrast and compare them (p. 106).

Self-soothing image book.

Children should list several sensory experiences that are pleasant to them. Then have them find collage materials (magazine pictures, colored paper, found objects) that relate to the feelings they listed. Tell them to glue each image or idea on a separate sheet of paper. Collate the pages and insert them in a binder so that the children may reflect on their different images (p. 158).

Creating a safe place.

Have children relax by closing their eyes and inhaling and exhaling slowly. They should continue to breath slowly while envisioning a "safe place." Tell them to draw a picture of this "safe place." When they are finished, ask them what the significance of the items in their safe place is and why it contributes to making them feel comfortable (p. 160).

Painting your feelings.

Children may freely paint whatever comes to mind (using oils, watercolors, acrylics, or temperas). Encourage them to use their whole bodies when making strokes and not to worry about whether or not the image will be pleasing to look at later on (p. 161).

Dyad drawings.

Allow two children to draw within the same space (i.e. on the same sheet of paper). Tell the children not to talk or sign and to have a "non-verbal" conversation on paper (p. 203).

Resources

American Art Therapy Association (AATA)

1202 Allanson Road

Mundelein, IL 60060

(847) 949-6064

<http://www.arttherapy.org>

Email: arttherapy@ntr.net

Art therapy Credentials Board (ATCB)

401 N. Michigan Avenue

Chicago, IL 60611

(312) 527-6764

Email: Atcb@sba.com

National Coalition of Arts Therapies Associations (NCATA)

2000 Century Plaza, Suite 108

Columbia, MD 21044

(410) 997-4040

<http://www.membrane.com/ncata>

American Journal of Art Therapy

Vermont College of Norwich University

Montpelier, VT 05602

The Arts in Psychotherapy

Elsevier Science

660 White Plains Road

Tarrytown, NY 10591-5153

Art Therapy: Journal of the American Art Therapy Association, AATA

1202 Allison Road

Mundelein, IL 60060

(847) 949-6064

Art Therapy Interview Questions

Background Information:

Name: ADRIANA IAPPEL SLUTZKY

Profession: TEACHER / SCULPTOR

Degrees/School Name(s):

RIT - MST ART EDUCATION

Experience using Art Therapy:

- IN ALL MY DEALINGS WITH ALL CHILDREN

Experience working with Deaf Children, if any:

ROCH. Sch. F/H DEAF: 17 YRS.

Questions:

1. What does 'art therapy' mean to you?
2. Based on your experience, do you feel that art therapy facilitates communication? If so, could you provide an example?
3. Describe the process you generally use when conducting art therapy. For example, How do you begin the therapy? How long does the therapy usually last? What methods do you use to analyze the therapy, if any? Do you work in collaboration with other professionals when using art therapy?
4. On what basis do you decide to use art therapy with children? Are there situations where art therapy has been particularly beneficial?
5. What do you feel has been the effect of your art therapy with children?
6. Do you conduct art therapy with deaf and hearing students in the same way? If different, how so?
7. What advice might you give to someone who wanted to begin using art therapy?
8. Is there anything that has not been addressed in this interview that you would like to add?

Project

Title: Art Therapy Brochure

Investigator

Kamila L. Riscili, Graduate Student, Master of Science in
Secondary Education of the Deaf and Hard of Hearing,
National Technical Institute for the Deaf, Rochester, NY
14623-5604

Phone:

(Local) 716.461.4196 (Permanent) 716.326.2709

Email:

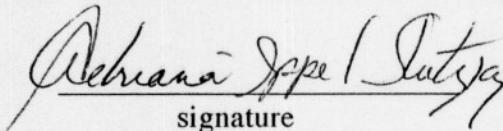
RISCILI77@hotmail.com

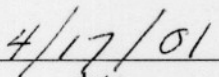
Thank you for agreeing to participate in an interview for my research project on Art Therapy. I am gathering data on the different methods of using Art Therapy with children in order to create an informative brochure for professionals who wish to use Art Therapy with Deaf children. Your signature on this consent form shows that you have been informed about the conditions and safeguards of this project.

1. Your participation is voluntary. You may withdraw from the study at any time, for any reason, without penalty.
2. Information gathered at this interview will be used only for the purpose of research as stated above.
3. Anonymity will be granted if the interviewee requests. Otherwise, the interviewee's name will only be cited in the research paper. Please sign below accordingly.
4. Questions or concerns may be addressed to the researcher at the email address or phone numbers listed at the top of this page.

.....

I have read the information provided and agree to participate in the interview for Art Therapy. I grant the researcher permission to cite my name in her research paper.


signature
ADRIANA IPPEL SLUTZKY


date

I have read the information provided and agree to participate in the interview for Art Therapy anonymously.

signature

date